PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docke; Numbe:

10/516610

Lifective October 1, 2003									-07		1001	U	
		CLAIMS A		(Column 1)		(Column 2)		SMALL I	<u></u>	OF.	OTHE		
TOTAL CLAIMS					•			RATE	FEE	7	RATE	F	ĒĒ
FOR .			NUMBER FILED		NUMBER EXTRA			BASIC FE	Ε	OR	BASIC FEE	95	<u> </u>
TOTAL CHARGEABLE CLAIMS			minus 20=		2			X\$ 9=		OR	X\$18=	pr	hC/
INDEPENDENT CLAIMS			S minus 3 =					X43=		OR	X86=	P	10
MULTIPLE DEPENDENT CLAIM PI			RESENT	RESENT		. 🛛		-145=	· .	OR	-290=		1
:1	the differenc	e in column 1 is	less than	zero, enter	"0" in (column 2		TOTAL		OR	TOTAL	13	20
CLAIMS AS AMENDED - PART II									٠		OTHER		
(Column 1)				(Colun		(Column 3)	, ,	SMALL ENTITY		OR			
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER	PRESENT EXTRA	ŀ	RATE	ADDI- TIONAL FEE		RATE	TIC	DI- NAL EE
	Total	141	Minus			=		XS 9=		OR	X\$18=		
	Independent	1.10	Minus			=		X43= ·		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					1	+145=		OR	+290=				
								TOTAL		ኒ '	TOTAL		.00
(Calume 1)								DDIT. FEE		JOH /	ADDIT. FEE	44	
		(Column 1) CLAIMS	Ī	(Colum		(Cólumn 3)	ı		ADDI-	1 1	•	<u>الله</u> ا	DI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM8 PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
NON I	Total	•	Minus	ee .		= .		X\$ 9=.	٠.	OR	X\$18=		
AME	Incependent	-	Minus	***	24 444	-		X43=		OR	X86=		
	FIRST PRESE	NTATION OF ML	LTIPLE D	EPENDENT	CLAIM			+145=		OR	+290=		
						•	ل نف	TOTAL		OR ,	TOTAL		
		(Column 1)		(Colum	n 2) [.]	(Column 3)							
AMENDMENT C	-	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FI	er Usly	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	AD TIO	NAL
	Total	•	Minus	59 .			Γ	X\$ 9=		OR	X\$18=		•
ME L	Independent	•	Minus	***		=	-	X43=			X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									<u> </u>	OR	//00-		\dashv
										OR	+290=	•	
~ #	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE		
· 1	ine riighest Num	mber Previously Paid ber Previously Paid	d For IN TI For (Total	HIS SPACE is to or Independen	less than ii) is the i	i 3, enler "3." highest number		DIT. FEE	cophate box				

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